

Church House Trust

BANK ACCOUNT APPLICATION FORM

Name of Scheme GORDON THOMAS PENSION SCHEME	SSAS - PSTR No.	Designated Client A/C
Professional Trustee (full name)	Address	
Trustee (full name) (For copy bank statements to be sent) GORDON WILLIAM THOMAS	Address 52 HEATHFIELD RD MAIDSTONE KENT ME14 2AA	
Trustee (full name)	Address	
Trustee (full name)	Address	
Trustee (full name)	Address	

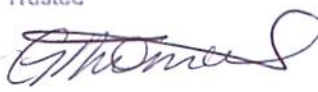
I/We authorize Church House Trust to release any information to the following company that they may request in connection with this account.

IFA/Practitioner/SSAS adviser (Name and address).....

We wish to open a Church House Trust Instant Access Account. Interest earned will be added to the account.	(For internal use only) Number: Bank Account Number: (60-95-31)
--	---

Contact telephone number (work) 01622 206425	Mobile 07775635021
E-Mail gt006hs271@blueyonder.co.uk	

We have read and agree to the terms and conditions applicable to this account, and authorise and request that Church House Trust pay all cheques and other instructions for payment signed on our behalf by any of the one/ two of the following duly authorised officials (delete as appropriate).

Signed on behalf of the Professional Trustee (if applicable)	Date
Signed on behalf of the Trustee 	Date 13/9/13
Signed on behalf of the Trustee	
Signed on behalf of the Trustee	
Signed on behalf of the Trustee	

Church House Trust Limited 3 Goldcroft, Yeovil
Tel: 01935 609600 Fax: 01935 410674 www.chu

Church House Trust Limited - Registered in England and Wales
Registered office is Discovery House, Whiting Road, Norwich NR4 6EJ. Authorised and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

BRAD
Gordon Thomas also has a standard life scheme, we are awaiting the discharge papers will send on ASAP Steve.